SCC eFile	2014 ANNUAL REPORT 214513403 COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION			
1.) CORPORATION NAME:			DUE DATE: 3	3/31/2014
COMMUNITY HOUSING PAR	TNERS CORPORATION		DOL DATE: 0	70172014
2.) VA REGISTERED AGENT NA JANAKA CASPER	ME AND OFFICE ADDRESS:		SCC ID NO: (01930528
448 DEPOT STREET NE		5.) STOCK INFORMATION		
CHRISTIANSBURG, VA			CLASS	AUTHORIZED
3.) CITY OR COUNTY OF VA RE MONTGOMERY COUNTY	GISTERED OFFICE:			
4.) STATE OR COUNTRY OF INC VA	CORPORATION:			
6.) PRINCIPAL OFFICE ADDRES	S:			
ADDRESS: 448 D	EPOT STREET NE			
CITY/ST/ZIP: CHF	RISTIANSBURG, VA 24073			
7.) DIRECTORS AND PRINCIPAL	OFFICERS: All directors an may be design	d principated as b	al officers must be both a director and	e listed. An individual I an officer.
		X OFF	FICER	DIRECTOR
NAME: TITLE:	JANAKA CASPER			
ADDRESS:	PRESIDENT 448 DEPOT STREET NE			
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073			
NAME.	0011110011001	X OFF	FICER	DIRECTOR
NAME: TITLE:	ORLANDO ARTZE VICE PRESIDENT			
ADDRESS:	4915 RADFORD AVE, STE 300			
CITY/ST/ZIP/CO:	RICHMOND, VA 23230			
		X OFF	FICER	DIRECTOR
NAME:	JEFFREY K REED			
TITLE: ADDRESS:	SEC/TREASURER 448 DEPOT STREET NE			
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073			
		X OFF	FICER	χ DIRECTOR
NAME:	KAREN TURNER			
TITLE:	CHAIRMAN			
ADDRESS:	6960 CAMPBELL DRIVE			
CITY/ST/ZIP/CO:	SALEM, VA 24153			
		OFF	FICER	X DIRECTOR
NAME: TITLE:	MALCOLM BATES			
ADDRESS:	DIRECTOR 6606 WEST BROAD STREET			
CITY/ST/ZIP/CO:	RICHMOND, VA 23230			
NIANAT-	00000	OFF	FICER	X DIRECTOR
NAME: TITLE:	GRETA HARRIS DIRECTOR			
ADDRESS:	BETTER HOUSING COALITION	23		
CITY/OT/ZID/OC	WEST BROAD ST, SUITE 100			
CITY/ST/ZIP/CO:	RICHMOND, VA 23241			

NAME: REV_JAMES HARRISON DIRECTOR ADDRESS: P.O. BOX 355 CITY/STZIP/CO: SMITHFIELD, VA_23883 NAME: KEITH HAYES						
TITLE: DIRECTOR ADDRESS: P.O. BOX 355 CITY/STIZIP/CO: SMITHFIELD, VA 23883 NAME: KEITH HAYES TITLE: DIRECTOR ADDRESS: 13009 HOLLY VIEW TERRACE CITY/STIZIP/CO: MIDLOTHIAN, VA 23112 NAME: ANDY MORIKAWA TITLE: VICE CHARMAN ADDRESS: 1505 WESTOVER DR. CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: RENEE CALLAHAN TITLE: DIRECTOR ADDRESS: 530 NORTH TRADE ST SUITE 301 CITY/STIZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDMER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD TITLE: DIRECTOR ADDRESS: BOY OLANDA ROAD TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/STIZIP/CO: FINCASTLE, VA 24090 NAME: OFFICER X DIRECTOR ADDRESS: 0150 HAWTHORNE HALL ROAD CITY/STIZIP/CO: FINCASTLE, VA 24090 NAME: OFFICER X DIRECTOR ADDRESS: 0160 HAWTHORNE HALL ROAD CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE STREET CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 1050 UTIL JEFFERSON ST SUITE 1700 CITY/STIZIP/CO: BLACKSBURG, VA 24060 TAFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. JANANKA CASPER JANNAKA CASP			OFFICER	X DIRECTOR		
TITLE: DIRECTOR ADDRESS: P.O. BOX 355 CITY/STIZIP/CO: SMITHFIELD, VA 23883 NAME: KEITH HAYES TITLE: DIRECTOR ADDRESS: 13009 HOLLY VIEW TERRACE CITY/STIZIP/CO: MIDLOTHIAN, VA 23112 NAME: ANDY MORIKAWA TITLE: VICE CHARMAN ADDRESS: 1505 WESTOVER DR. CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: RENEE CALLAHAN TITLE: DIRECTOR ADDRESS: 530 NORTH TRADE ST SUITE 301 CITY/STIZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDMER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD TITLE: DIRECTOR ADDRESS: BOY OLANDA ROAD TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/STIZIP/CO: FINCASTLE, VA 24090 NAME: OFFICER X DIRECTOR ADDRESS: 0150 HAWTHORNE HALL ROAD CITY/STIZIP/CO: FINCASTLE, VA 24090 NAME: OFFICER X DIRECTOR ADDRESS: 0160 HAWTHORNE HALL ROAD CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE STREET CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 1050 UTIL JEFFERSON ST SUITE 1700 CITY/STIZIP/CO: BLACKSBURG, VA 24060 TAFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. JANANKA CASPER JANNAKA CASP	NAME:	REV.IAMES HARRISON				
ADDRESS: P.O. BOX 355 CITY/STIZIP/CO: SMITHFIELD, VA 23883 RAME: KEITH HAYES OFFICER X DIRECTOR						
CITY/ST/ZIP/CO: SMITHFIELD, VA 23883 NAME: KEITH HAYES DIRECTOR						
NAME: KEITH HAYES TITLE: DIRECTOR ADDRESS: 13008 HOLD VIEW TERRACE CITY/STIZIP/CO: MIDLOTHIAN, VA 23112 NAME: ANDY MORIKAWA TITLE: VICE CHAIRMAN ADDRESS: 1505 WESTOVER DR. CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: RENEE CALLAHAN TITLE: DIRECTOR ADDRESS: 530 NORTH TRADE ST SUITE 301 CITY/STIZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: B205 YOLANDA ROAD CITY/STIZIP/CO: HENNEICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1060 HAWTHORNE HALL ROAD CITY/STIZIP/CO: FINCASTLE, VA 24060 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/STIZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/STIZIP/CO: BLACKSBURG, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/STIZIP/CO: BLACKSBURG, VA 24011 NAME: JOHN RANDOLPH TITLE: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 LAFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. 1/8/JANAKA CASPER JANAKA CASPER JANAKA CASPER JANAKA CASPER, PRESIDENT JANAKA CASPER JANAKA CASP		_				
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TITLE: DIRECTOR ADDRESS: 13000 HOLLY VIEW TERRACE CITY/ST/ZIP/CO: MIDLOTHIAN, VA 23112 NAME: ANDY MORIKAWA TITLE: VICE CHAIRMAN ADDRESS: 1505 WESTOVER DR. CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: RENEE CALLAHAN TITLE: DIRECTOR ADDRESS: 530 NORTH TRADE ST SUITE 301 CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 1100 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 1100 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 LAFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. JAJANAKA CASPER JANAKA CASPER JANAKA CASPER JANAKA CASPER JANAKA CORPORATE DATE			OFFICER	χ DIRECTOR		
ADDRESS: 13090 HOLLY VIEW TERRACE CITY/ST/ZIP/CO: MIDLOTHIAN, VA 23112 NAME: ANDY MORIKAWA TITLE: VICE CHAIRMAN ADDRESS: 1505 WESTOVER DR. CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: RENEE CALLAHAN TITLE: DIRECTOR ADDRESS: 530 NORTH TRADE ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: B205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 1050 WINSTONE STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: ROANOKE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 LAFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. 1/8/JANAKA CASPER JANAKA CASPER JANAKA CASPER, PRESIDENT 3/3/2014	NAME:	KEITH HAYES				
ADDRESS: 1300 HOLLY VIEW TERRACE CITY/ST/ZIP/CO: MIDLOTHIAN, VA 23112 NAME: ANDY MORIKAWA TITLE: VICE CHAIRMAN ADDRESS: 1505 WESTOVER DR. CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: RENEE CALLAHAN TITLE: DIRECTOR ADDRESS: 530 NORTH TRADE ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8206 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: HARW MCCOY TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 ADDRESS	TITI F	_				
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NAME: ANDY MORIKAWA TITLE: VICE CHAIRMAN ADDRESS: 1505 WESTOVER DR. CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: RENEE CALLAHAN TITLE: DIRECTOR ADDRESS: 530 NORTH TRADE ST SUITE 301 CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUR ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 01 SOUR ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 10 SOUR ANDREW CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUR ANDREW CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 110 OWNILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 LAFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER JANAKA CASPER, PRESIDENT 3/13/2014		_	ACE			
NAME: DIRECTOR ADDRESS: 1505 WESTOVER DR. CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: RENEE CALLAHAN DIRECTOR ADDRESS: 530 NORTH TRADE ST SUITE 301 NAME: GARDNER CAMPBELL DIRECTOR ADDRESS: 8206 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: DIRECTOR ADDRESS: 9206 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND DIRECTOR ADDRESS: 1050 HAVITHORINE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDY HALL DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCCOY DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 NAME: SHAWN MCMAHON DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 NAME: JOHN RANDOLPH DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 LAFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER, PRESIDENT 3/3/2014 SIGNATURE OF DIRECTOR DATE JOHN RAND LAPE AND CORPORATE DATE JOHN RAND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	611 1/31/211 /6	O. MIDLOTHIAN, VA 23112				
TITLE: VICE CHAIRMAN ADDRESS: 1505 WESTOVER DR. CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: RENEE CALLAHAN DIRECTOR ADDRESS: 530 NORTH TRADE ST SUITE 301 CITY/ST/ZIP/CO: SUITE 301 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 LAFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. SIGNATURE OF DIRECTOR ONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. SIGNATURE OF DIRECTOROFFICER PRINTED NAME AND COPPORATE JANAKA CASPER JANE JANAKA CASPER JANE JANAKA CASPER JANE JANAKA CASPER JAN			X OFFICER	χ DIRECTOR		
TITLE: VICE CHAIRMAN ADDRESS: 1505 WESTOVER OR. CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: RENEE CALLAHAN TITLE: DIRECTOR ADDRESS: 530 NORTH TRADE ST SUITE 301 CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL DIRECTOR ADDRESS: B205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 1050 MENTWOOD BRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 1050 MENTWOOD BRIVE STITLE: DIRECTOR BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ROANOKE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ROANOKE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR BLACKSBURG, WA 24060 LAFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. SIGNATURE OF DIRECTOR/OFFICER PRINTED NAME AND CORPORATE DATE	NAME:	ANDY MORIKAWA				
ADDRESS: 1506 WESTOVER DR. CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: RENEE CALLAHAN TITLE: DIRECTOR ADDRESS: 530 NORTH TRADE ST SUITE 301 CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 82.05 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 INAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 INAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 INAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 INAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 INAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 INAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 INAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 INAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 INAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 INAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 INAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 INAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOU	TITLE:	_				
CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: RENEE CALLAHAN TITLE: DIRECTOR ADDRESS: 530 NORTH TRADE ST SUITE 301 CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 LAFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER JANAKA CASPER PRINTED NAME AND COPPORATE DATE PRINTED NAME AND COPPORATE JANAKA CASPER J						
NAME: RENEE CALLAHAN TITLE: DIRECTOR ADDRESS: \$30 NORTH TRADE ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 01650 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 0160 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 0160 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 0160 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: ROANNE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER PRINTED NAME AND CORPORATE DATE		_				
NAME: RENEE CALLAHAN TITLE: DIRECTOR ADDRESS: 530 NORTH TRADE ST SUITE 301 CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: ROANOKE, VA 24061 NAME: JOHN RAMHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 NAME: JOHN RAMDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER JANAKA CASPER, PRESIDENT JA1/2014 SIGNATURE OF DIRECTORFICER PRINTED NAME AND COPPORATE DATE JOHN RAME AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER, PRESIDENT JA1/2014	611 1/31/211 /6	O. BLACKSBURG, VA 24060				
TITLE: DIRECTOR ADDRESS: \$30 NORTH TRADE ST SUITE 301 CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 11 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER PRINTED NAME AND COPPORATE DATE			OFFICER	χ DIRECTOR		
TITLE: DIRECTOR ADDRESS: 530 NORTH TRADE ST SUITE 301 CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24061 I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER JANAKA CASPER JANAKA CASPER JANAKA CASPER JANAKE AND COPPORATE DATE JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 1100 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER PRINTED NAME AND COPPORATE DATE	NAME:	RENEE CALLAHAN				
ADDRESS: 530 NORTH TRADE ST SUITE 301 SUITE 301 WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 ROADRESS: 10 SOUTH JEFFERSON ST SUITE 1700 ROADRESS: 110 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 110 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 110 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 LAFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER JANAKA CASPER, PRESIDENT 3/13/2014	TITLE:					
CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: ROANOKE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: ROANOKE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 110 WILLARD DRIVE CITY/ST/ZIP/CO: ROANOKE, VA 24060 I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. SIGNATURE OF DIRECTOROFFICER PRINTED NAME AND CORPORATE DATE						
CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 ADDRESS: 10 SOUTH JEFFERSON ST CITY/ST/ZIP/CO: ROANOKE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 ROANOKE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 110 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER JANAKA CASPER, PRESIDENT 3/13/2014 SIGNATURE OF DIRECTOR/OFFICER	ABBITEOU.					
NAME: JOHN GARLAND OFFICER X DIRECTOR NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: ROANOKE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER, PRESIDENT 3/13/2104 SIGNATURE OF DIRECTOROFFICER PRINTED NAME AND CORPORATE DATE	CITY/ST/7IP/C		101			
NAME: GARDNER CAMPBELL TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: ROANOKE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 110 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. JANAKA CASPER JANAKA CASPER PRINTED NAME AND CORPORATE DATE JANAKA CASPER, PRESIDENT 3/13/210/41 SIGNATURE OF DIRECTORPORATE PRINTED NAME AND CORPORATE DATE	011 1/01/211 /0	o. WINSTON-SALEIVI, NC 27				
TITLE: DIRECTOR ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: ROANOKE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 1100 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 1100 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS 0F THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. SIGNATURE OF DIRECTOR/OFFICER PRINTED NAME AND CORPORATE DATE			OFFICER	χ DIRECTOR		
ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: ROANOKE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 1100 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER JANAKA CASPER, PRESIDENT 3/13/2014 SIGNATURE OF DIRECTOROPFICER PRINTED NAME AND CORPORATE DATE	NAME:	GARDNER CAMPBELL				
ADDRESS: 8205 YOLANDA ROAD CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME: JOHN GARLAND TITLE: DIRECTOR ADDRESS: 1050 HAWTHORNE HALL ROAD CITY/ST/ZIP/CO: FINCASTLE, VA 24090 NAME: ANDY HALL TITLE: DIRECTOR ADDRESS: 801 KENTWOOD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: ANDREW MCCOY TITLE: DIRECTOR ADDRESS: 707 MONTGOMERY STREET CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: SHAWN MCMAHON TITLE: DIRECTOR ADDRESS: 10 SOUTH JEFFERSON ST SUITE 1700 CITY/ST/ZIP/CO: ROANCKE, VA 24011 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 1100 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 NAME: JOHN RANDOLPH TITLE: DIRECTOR ADDRESS: 1100 WILLARD DRIVE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. /// JANAKA CASPER JANAKA CASPER JANAKA CASPER, PRESIDENT 3/13/2014 SIGNATURE OF DIRECTOROFFICER PRINTED NAME AND CORPORATE DATE	TITLE:					
CITY/ST/ZIP/CO: HENRICO, VA 23229 NAME:	ADDRESS:					
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SIGNATURE OF DIRECTOR/OFFICER PRINTED NAME AND CORPORATE DATE	/s/ JANAKA CASPER	JANAKA CASPER. PR	RESIDENT	3/13/2014		
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.